

DEPARTMENT OF WORKFORCE DEVELOPMENT

Division of Economic Support Bureau of Welfare Initiatives

TO: **Economic Support Supervisors**

Economic Support Lead Workers

Training Staff

FSET Administrative and Provider Agencies

Child Care Coordinators

W-2 Agencies

BWI OPERATIONS MEMO

No.: 99-16

File: 1120 1250.2

Date: 03/02/99

Non W-2 [X] W-2 [X] CC [X]

PRIORITY: URGENT

FROM: Stephen M. Dow

Program Implementation Team

Policy Analysis and Program Implementation Section

REVIEW DATE CHANGES IN CARES SUBJECT:

CROSS REFERENCE: FS Handbook App. 21.3

Wisconsin Works Manual Ch. 4.5.2

EFFECTIVE DATE: March 8, 1999

PURPOSE

This memo describes changes made to the CARES system to properly set reviews that are scheduled for each assistance group (AG) that makes up a case. The estimated date of the changes in CARES is March 8, 1999.

BACKGROUND

The Food and Nutrition Service requires three month reviews for food stamp cases with the exception of Old, Blind, or Disabled (OBD) cases. Food Stamp reviews may alternate between Face to Face (FTF) reviews and Non-Face to Face (NFTF) reviews under certain circumstances. Currently, a NFTF review is a telephone review and may eventually include mail-in and fax reviews. Until now, CARES could not accommodate all of the detailed review policies for Child Care, Food Stamps, Medicaid, and Wisconsin Works. The changes detailed below accommodate all of the review policies for each of these assistance types.

REVIEW POLICY SUMMARY

Note: A FTF review will count as a review for all open AGs and all AGs which have been closed for less than a calendar month. Also, if a case is eligible for a NFTF review, they must be informed of this and they must be allowed to complete a NFTF review if they request it. Finally, remember that when a case is transferred to a different office on ACCT, CARES resets all of the AG level review dates on AGOR to the last day of the following month, and all of the following policies also apply.

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Food Stamps (FS)

- 1. Non-OBD cases must be reviewed every 3 months.
- 2. Non-OBD reviews may alternate between FTF reviews and NFTF reviews only if at least one of the following conditions is met:
 - a. No authorized representative or other able-bodied adult can come to the FS agency for an interview in person; **or**
 - b. The primary person is scheduled in a W-2 employment position for 30 hours or more per week; or
 - c. The primary person works in unsubsidized employment for 30 hours or more per week.

All other FS groups must send a primary person or authorized representative to the agency for an interview in person.

- 3. OBD cases require a review every 12 months. These may always be NFTF.
- 4. A closed food stamp AG always requires a FTF interview to open. A NFTF review may not be done for a FS AG that is closed, even if it's closed for less than a calendar month.

Medicaid (MA)

Medicaid policy has changed so that a FTF review is no longer required for any type of Medicaid. CARES has been programmed to reflect this policy.

- 1. Medicaid AGs no longer need to complete a FTF review at least once a year.
- 2. NFTF reviews will always count as a review for Medicaid.
- 3. Any review completed for another AG will count as a review for Medicaid.
- 4. Medicaid AGs must always be allowed to do a NFTF review if they want.

Child Care (CC)

- 1. Child Care AGs require a review every 6 months.
- Child Care reviews must be FTF. NFTF reviews will not count as Child Care reviews.
- A new alert will be generated to the CC authorizing worker when any FTF review is started. It will state "A CC eligibility review has been initiated."

Wisconsin Works (W-2)

- 1. W-2 AGs require a review at least every 6 months.
- 2. W-2 reviews must be FTF. NFTF reviews will not count as W-2 reviews.

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CARES CHANGES

Two new screens have been added to correctly determine AGs' review dates:

ANRQ - The Eligibility Review Question Screen

| ANRQ | ELIGIBILITY REVIEW QUESTION | 02/19 | /99 08:40 |
|----------------------|-----------------------------|-----------------|-----------|
| CASE: 1000224716 | WORKER: J | X2517 XCTC93 D | HIPPLER |
| LAST UPDATED: | CASE STATUS: OPI | EN CASE MODE: C | ONGOING |
| IS THIS A FACE-TO-FA | ACE REVIEW ? | | |
| NEXT TRAN: PAI | RMS: 1000224716 | | |

ANRQ will ask the question "Is this a Face to Face review?" It will appear when ASER is entered to start a review. The case will go into review mode only after the question on ANRQ is answered and the worker hits enter. Until that point, the worker can hit PF4 or PF12 to go to the main menu without starting the review. Or, the worker could hit PF10 to log off without starting the review.

If the answer to the question is "Y", CARES will count the review as a review for all open AGs and AGs closed for less than a calendar month. It will update the AG level review dates on screen AGOR according to that AG's review policy. The Eligibility Review Date field on AGOR and AGEC is the case level review date. It is determined by taking the earliest AG level review date on AGOR and making it the next Eligibility Review Date. AGOR is only updated after AGEC is processed.

If the answer to the question on ANRQ is "N" and food stamps and Medicaid are open, CARES will check to see if the case is eligible to do a NFTF review for FS. If not, the message "This review will only count for MA" will appear. A FTF review would have to be completed to count as a FS review in this example.

If the answer to the question on ANRQ is "N" and FS are closed while Medicaid is open, no message will appear and the review will count only for Medicaid.

If the answer to the question on ANRQ is "N" and FS and Medicaid are closed, the message "This review must be face to face" will appear.

If the answer to the question on ANRQ is "N" when FS is open and Medicaid is closed and the last review done was a NFTF review and the case is not an OBD case, the message "This review must be face to face" will appear.

Note: The AG level review dates on AGOR will be updated only if a review counts for that AG.

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EXAMPLE: A case is open for FS, Medicaid, CC and W-2 but only FS is due for a review on 03/31/99. AGOR looks like this before the review:

Eligibility Review Date: 03/31/99

| CAT | SEQ | AG STATUS | REVIEW DATE |
|------|-----|-----------|-------------|
| CC | 01 | OP | 06 30 1999 |
| FS | 01 | OP | 03 31 1999 |
| MA R | 01 | OP | 06 30 1999 |
| WW C | 01 | OP | 07 31 1999 |

The worker determines that a NFTF review can be held and the review is done over the phone on 03/05/99. When the worker goes to ANRQ, s/he answers "N" to the question "Is this a face to face interview?" When s/he hits enter, the answer is accepted and the case changes to Review mode. When the review is completed and AGEC is processed, AGOR will reflect the following:

- CC The date does not change. The review did not count for CC so the CC AG level review date remains 06/30/99.
- FS Three months are added to the month in which the review was completed. The new FS AG review date is 06/30/99. If the case was OBD, 12 months would have been added to the date the review was completed.
- MA Six months are added to the month in which the review was completed. The new Medicaid AG review date is 09/30/99. If the Medicaid type was a deductible or extension, the appropriate review date would be set.
- W-2 The date does not change. The review did not count for W-2 so the W-2 AG level review date remains 07/31/99.

AGOR will look like this after the benefits are confirmed on AGEC:

Eligibility Review Date: 06/30/99

| CAT | SEQ | AG STATUS | REVIEW DATE |
|------|-----|-----------|--------------------|
| CC | 01 | OP | 06 30 1999 |
| FS | 01 | OP | 06 30 1999 |
| MA R | 01 | OP | 09 30 1999 |
| WW C | 01 | OP | 07 31 1999 |

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ANRH - The Eligibility Review Question History Screen

| ANRH CASE: 1000224716 |] | ELIGIBILITY RE | VIEW QUESTION HISTORY WORKER: JX2517 CASE STATUS: OPEN | 02/19/99 09:09 XCTC93 D HIPPLER CASE MODE: ONGOING |
|--------------------------|----------|----------------|--|--|
| FACE-TO-FACE Y | OBD N | MA ONLY REV | REVIEW BEG DT 02-19-1999 | |
| - | 11 | | G_ 17 1777 | |
| NEXT TRAN: | PARMS: | 1000224716 | | |

ANRH is a history screen that will track when previous reviews were started, whether they were FTF or not, whether the case was OBD or not, and whether the review was for "MA only" or not. OBD status is taken from information entered on ANDI and ANID. The "MA only" field indicates whether the review counted only for the Medicaid AG.

This screen will be a valuable tool for workers when a client calls to schedule a review. ANRH does not come up in a driver flow, therefore workers should check ANRH and AGOR to see if a review can be a NFTF review.

EXAMPLE: A client receiving FS, MA and W-2 received a Review Due notice and called the Supportive Services Planner (SSP) to schedule an appointment. The worker should go to AGOR and decide which AGs need to be reviewed. If FS needs to be reviewed, the worker should go to ANRH to determine if they are eligible for a NFTF review. If the last review was FTF, they may be eligible for a NFTF review if the other policy criteria are met. If the case is an OBD case, they may do a NFTF review anyway. If W-2 is due for a review, the review must be a FTF review. And as always, any review done will count as an MA review.

REVIEW PROCESSING IN PRIVATE W-2 AGENCIES

There is no way of knowing in advance if a review will be a FTF or NFTF review. The "Eligibility Review Due" and "Eligibility Review Past Due" alerts will be generated to both SSPs and Financial and Employment Planners (FEPs). When a FEP receives this alert, s/he needs to communicate with the SSP and determine if the review will be counted for the W-2 AG. If so, the FEP must coordinate the W-2 review. It's possible that the alert to the FEP may not be working correctly by March 5. In that case, instructions will be sent to private W-2 agencies.

CONTACTS

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